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CONFIRMATION NO. 1698

| SERIAL NUMBER  | FILING OR 371(c) DATE   | CLASS                         | GROUP ART UNIT  | ATTORNEY DOCKET NO.             |                                |
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| 10/071,415   | 02/08/2002  | 707                           | 2161  | OR01-13001                      |                                |
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| <b>** CONTINUING DATA *****</b> <i>None</i> <i>LN</i>  |   |                               |   |                                 |                                |
| <b>** FOREIGN APPLICATIONS *****</b> <i>None</i> <i>LN</i>   |   |                               |   |                                 |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 03/05/2002</b>   |   |                               |   |                                 |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>met<br>Verified and <i>Signature</i> <i>LN</i><br>Acknowledged <i>Examiner's Signature</i> <i>Initials</i> |   | <b>STATE OR COUNTRY</b><br>CA | <b>SHEETS DRAWING</b><br>2  | <b>TOTAL CLAIMS</b><br>25<br>27 | <b>INDEPENDENT CLAIMS</b><br>5 |
| <b>ADDRESS</b><br>51067  |   |                               |   |                                 |                                |
| <b>TITLE</b><br>System and method for facilitating a distributed search of local and remote systems  |   |                               |   |                                 |                                |
| <b>FILING FEE RECEIVED</b><br>1098   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                 |                                |